## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000076843

City-St-Zip:

APOPKA, FL 32712

FILED Jul 17, 2008 Secretary of State

Entity Name: C JIMENEZ CLEANING SERVICES INC					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
6403 SANS APOPKA, F					
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
6403 SANSON DR APOPKA, FL 32712					
FEI Number:	20-2905692	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ALL FLORIDA FIRM, INC. 465 S. VOLUSIA AVENUE SUITE C ORANGE CITY, FL 32763 US			2471 E. SEMORAN BL\	PROFESSIONAL ACCOUNTANTS & CONSULTANTS, IN 2471 E. SEMORAN BLVD. APOPKA, FL 32703 US	
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: DANIEL ALVAREZ				07/17/2008	
Electronic Signature of Registered Agent			ıt	Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () JIMENEZ, CAR 6403 SANSON APOPKA, FL 3	DR	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () LOPEZ, ABEL 6437 SANSON APOPKA, FL 3		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	SEC () LOPEZ, AMALI/ 6437 SANSON		Title: ( Name: Address:	) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: CARLOS JIMENEZ Ρ 07/17/2008